

AGREEMENT/ATTENDEE LIST REQUEST FORM

Please TYPE.

Company _____ Booth # _____

Contact name _____

Address _____
Street/PO Box _____

City _____ State _____ Zip code _____

Phone _____ Fax _____

E-Mail _____

Exhibitor representative(s) must sign this Agreement/Order form and adhere to the following provisions:

1. This service is available to contracted Exhibitors ONLY and will not include attendee phone, fax and/or e-mail data.
2. Payment for list rental must accompany Agreement/Attendee List Request Form.
3. Attendees names/addresses are for one-time use only and will be used promptly upon receipt, within 30 days of the official Cable-Tec Expo 2009 show dates.
4. The exhibitor will handle all names confidentially and is fully responsible for the security thereof. The names are not to be copied for any purpose or disclosed to any person without expressed written consent from Cable-Tec Expo 2009 show management.

I wish to purchase the:

	PRE-REGISTERED LIST	POST-CONFERENCE LIST
Pressure-Sensitive Mailing Labels	<input type="radio"/> \$575	<input type="radio"/> \$800
Electronic File (Excel)	<input type="radio"/> \$625	<input type="radio"/> \$850

*Attendee List requests received after November 29, 2009 will NOT be honored.
Lists/Labels will be distributed after October 2, 2009.

Form of Payment

- Check Payable to SCTE
 American Express MasterCard Visa

Amount Enclosed \$ _____

Cardholder name _____

Signature _____

Card number _____

Expiration date _____

I would like my labels shipped "Overnight Delivery".

FedEx Account Number _____

Contributions or gifts to the Society of Cable Telecommunications Engineers, Inc. are not tax deductible as charitable contributions for federal income tax purposes.

This form must be received at **SCTE Headquarters** by **October 2, 2009**
Society of Cable Telecommunications Engineers Inc. • 140 Philips Road, Exton, PA 19341-1318
800-542-5040 • 610-363-6888 • Fax: 610-363-5834 • E-mail: expo@scte.org • www.scte.org